

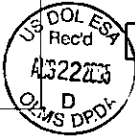
FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U- <u>10412</u>	2. Fiscal Year Covered From: <u>1 / 1 / 2004</u> Through: <u>12 / 31 / 2004</u>
3. Name and address of person filing. Name <u>Daniel A Hurley</u> P.O. Box, Bldg., Room No., if any Street <u>42 East Home Rd</u> City <u>Bomansville</u> State <u>New York</u> ZIP Code + 4 <u>14026</u>	4. Name, file number, and address of labor organization. Name <u>Buffalo Laborers Training Fund</u> Labor Organization File Number <u>044908</u> P.O. Box, Building and Room Number, if any Street <u>1370 Seneca st.</u> City <u>Buffalo NY</u> State <u>New York</u> ZIP Code + 4 <u>14210</u>
5. Position in labor organization.	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>Daniel Hurley</u>	On <u>8/15/2005</u> Date	<u>716 825-0883</u> Telephone Number

Name of Person Filing	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <i>Buffalo laborers Training Fund</i></p> <p>Trade Name, if any: <i>laborers</i></p> <p>P.O. Box, Bldg., Room No., if any <i>Suite 200</i></p> <p>Street <i>2750 Harlem Rd.</i></p> <p>City <i>Cheektawaga</i></p> <p>State <i>New York</i> ZIP Code + 4 <i>14225</i></p>	<p>9. Business deals with:</p> <p>a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <i>Buffalo laborers Training Fund.</i></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any <i>Suite 200</i></p> <p>Street <i>2750 Harlem Rd.</i></p> <p>City <i>Cheektawaga</i></p> <p>State <i>New York</i> ZIP Code + 4 <i>14225</i></p>	<p>11.a. Nature of such dealing.</p> <p><i>CONFERENCES and Education meals and Travel</i></p>
	<p>11.b. Approximate dollar value of such dealing. <i>9,300.65</i></p>
	<p>12.a. Nature of interest held or income received.</p> <p><i>Tolls & Parking</i></p>
	<p>12.b. Amount. <i>73.55</i></p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <i>The Marco Consulting Group</i></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any <i>Ninth Floor</i></p> <p>Street <i>550 West Washington Blvd.</i></p> <p>City <i>Chicago</i></p> <p>State <i>Illinois</i> ZIP Code + 4 <i>60661</i></p>	<p>14.a. Nature of payment.</p> <p><i>Golf</i></p>
<p>13.b. Is the Business an Employer or Consultant <input checked="" type="checkbox"/> ?</p>	<p>14.b. Amount of payment. <i>88.00</i></p>

BUFFALO LABORERS TRAINING FUND

August 15, 2005

U.S. Department of Labor
Employee Standards Administration
Office of Labor-Management Standards
200 Constitution Avenue, NW
Room N-5616
Washington, DC 20210

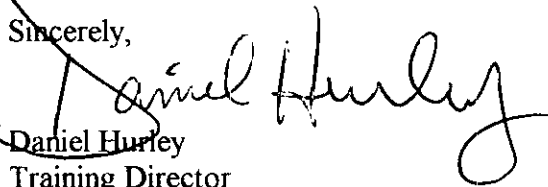
Re: Form LM-30 Filing for Daniel Hurley, Buffalo Laborers Training Fund

Dear Sir or Madam:

Enclosed are my Labor Organization Officer and Employee Report LM-30 for the 2004 reporting period. In filing the report I have reviewed all of my available 2004 records as well as my recollection. I have provided my best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount.

This filing reflects my good faith effort to comply with LM-30 reporting provisions and in doing so; the enclosed material represents my best recollection and estimate of all lawfully reported benefits that I received in 2004.

Sincerely,



Daniel Hurley
Training Director
Buffalo Laborers Training Fund